| Department of Health & Welfare<br>Bureau of Facility Standards<br>Residential Care or Assisted Living Checklist | Version Date: 5/06<br>Page 1 of 3 |
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**Checklist #14**

| **Functional Area:** **Fire & Life Safety** | Yes = In Compliance<br>No = Further Action Needed |
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**Objective:** The facility protects the lives and safety of residents by complying with Fire and Life Safety rules and codes.

| Specific Criteria | Yes | No |
|---|---|---|
| **Policy: IDAPA 16.03.22.153**<br>1. Does the facility have a policy that outlines plans for the operation, inspection, and testing of utilities, fire safety and maintenance for all areas of the facility? {IDAPA 16.03.22.153.09} | | |
| **Policy: IDAPA 16.03.22.161**<br>1. Does the facility have a smoking policy?<br>2. Is it known to all facility personnel, residents and visitors?<br>(Note: Nothing in this section requires that smoking be permitted in a facility.) {IDAPA 16.03.22.161.01&02} | | |
| 3. If the facility allows smoking, does your smoking policy include the following:<br>   a. Prohibiting smoking in areas where flammable liquids, gases, or oxidizers are located?<br>   b. Prohibiting smoking in bed by anyone?<br>   c. Prohibiting unsupervised smoking by residents who are not mentally or physically responsible, or are affected by medication?<br>   d. Prohibiting smoking in areas where combustible materials are stored?<br>   e. Designating areas where smoking is permitted?<br>{IDAPA 16.03.22.161.03} | | |
| **Requirements: IDAPA 16.03.22.400 – 404**<br>1. Does your facility meet local and state codes applicable to residential care or assisted living facilities for fire and life safety standards?<br>{IDAPA 16.03.22.400} | | |
| **Additional FLS Requirements: IDAPA 16.03.22.405**<br>1. Does the facility's electrical installations and equipment comply with local or state electrical requirements to include the following:<br>   a. Equipment designed to be grounded is grounded?<br>   b. Extension cords and multiple electrical adapters are not used, except approved grounded multiple electrical adapters with a built-in breaker? {IDAPA 16.03.22.405.01} | | |
| 2. Does the facility have an electrically supervised, manually operated fire alarm smoke detection system in each building housing residents?<br><br>(The system must have a control panel, manual pull stations, smoke detectors, sounding devices, power backup and any sprinkler flow or alarm devices. The system, including devices, their location, and installation must be approved by the Licensing and Survey Agency prior to installation.)<br>{IDAPA 16.03.22.405.02} | | |

| Specific Criteria | Yes | No |
|---|---|---|
| 3. Does the facility handle, use and store medical gas according to NFPA Standard 99, Standard for Health Care Facilities, 2000 Edition, to include the following:<br>    a. No smoking signs posted where oxygen is used or stored?<br>    b. Oxygen cylinders secured upright?<br>    c. Trans-filling of liquid oxygen in a ventilated/sprinkled room with a concrete or tile floor? {IDAPA 16.03.22.405.03} | | |
| 4. If the facility has solid fuel heating devices, such as wood burning or pellet stoves, are they installed according to NFPA, Standard #211, Standard for Chimneys, Fireplaces, Vents, and Solid Burning Appliances, 2000 Edition?<br>5. Are clearances around the heating devices safely maintained?<br>6. Are chimney flues safely maintained? {IDAPA 16.03.22.405.04} | | |
| 7. Is your facility maintained in a safe manner, including:<br>    a. Unobstructed exits?<br>    b. All ramps, porches, sidewalks, and open stairs free of snow and ice buildup?<br>    c. Wood stoves have protection to prevent residents from getting burned?<br>    d. Fireplaces have a heat tempered glass the equivalent?<br>    e. Boilers, hot water heaters, and unfired pressure vessels have automatic pressure relief valves?<br>    f. Portable heating devices are not used?<br>    (Heated mattress pads, electric blankets and heating pads are acceptable when ordered by an authorized provider or physician.)<br>    g. Flammable materials are not stored in the facility unless the building is protected by sprinklers? {IDAPA 16.03.22.405.05} | | |
| 8. Are fences or railings in place to protect residents from hazards on or bordering facility property? {IDAPA 16.03.22.405.06} | | |
| 9. Are locks on exit doors easily operable from the inside? {IDAPA 16.03.22.405.07} | | |
| 10. Are portable fire extinguishers installed throughout the facility? {IDAPA 16.03.22.405.08} | | |
| 11. Do any residents requiring assistance in ambulation reside on the first story, unless the facility complies with Sections 401 through 404 of these rules? {IDAPA 16.03.22.405.09} | | |
| 12. Does the facility have a telephone on the premises available for staff to use in an emergency, and are emergency numbers posted near the telephone? {IDAPA 16.03.22.405.10} | | |
| 13. Is your facility free from weeds and trash? {IDAPA 16.03.22.405.11} | | |
| **Requirements: IDAPA 16.03.22.415**<br>**Maintenance of Fire Life Safety Equipment and Systems**<br>1. Are all systems maintained to assure the safety of the residents? {IDAPA 16.03.22.415.01} | | |
| 2. Are fuel-fired heating devices, such as gas, propane or oil, inspected, serviced and cleaned at least annually by a professional? {IDAPA 16.03.22.415.02} | | |

| Specific Criteria | Yes | No |
|---|---|---|
| 3. Are portable fire extinguishers serviced in accordance with NFPA Standard #10, Standard for Portable Fire Extinguishers, 2002 Edition, as listed below in #5?                 {IDAPA 16.03.22.415.03} | | |
| 4. Are portable fire extinguishers examined at least monthly by facility staff to determine:<br>   a. Each extinguisher is in its designated location?<br>   b. Each extinguisher's seal or tamper indicator is not broken?<br>   c. Each extinguisher has not been damaged?<br>   d. Each extinguisher is charged?<br>   e. The inspection tag is initialed and dated by the person doing the monthly examination?                 {IDAPA 16.03.22.415.03} | | |
| 5. Is the facility's fire alarm smoke detection system serviced at least annually by a professional?                 {IDAPA 16.03.22.415.04} | | |
| 6. Is the fire alarm smoke detection system tested at least monthly by staff?                 {IDAPA 16.03.22.415.04} | | |
| 7. Is the facility's sprinkler system serviced at least annually by a sprinkler system contractor licensed by the Idaho State Fire Marshal's office?                 {IDAPA 16.03.22.415.05} | | |
| 8. Does the facility conduct a fire watch during any time the fire alarm, smoke detection, or sprinkler system is inoperable for greater than 4 hours?                 {IDAPA 16.03.22.415.06} | | |
| **Record Keeping or Documentation:  IDAPA 16.03.22.750** | | |
| 1. Does the administrator assure the facility maintains records for fire and life safety as described in Subsections 750.01 through 750.06 of these rules?                 {IDAPA 16.03.22.750} | | |
| 2. Does the administrator assure the facility has documentation of one fire drill per shift per quarter that contains a description of each drill, date and time, response of the personnel and residents, problems encountered, and recommendations for improvement?                 {IDAPA 16.03.22.750.01} | | |
| 3. If the facility has a fire incident, does the administrator assure the facility has a copy of the reporting form, completed and submitted to the Licensing and Survey Agency that includes the date, origin, extent of damage, method of extinguishment, and injuries if any?<br>(website – www.facilitystandards.idaho.gov)                 {IDAPA 16.03.22.750.02} | | |
| 4. Does the facility have a copy of the annual fuel fired heating (gas, propane or oil) inspection?                 {IDAPA 16.03.22.750.03} | | |
| 5. Does the administrator assure the facility has records of the monthly examination of the portable fire extinguishers?                 {IDAPA 16.03.22.750.04} | | |
| 6. Does the administrator assure the facility has the reports of the annual professional inspection and monthly staff testing of the fire alarm smoke detection system?                 {IDAPA 16.03.22.750.05} | | |
| 7. Does the administrator assure the facility has the report of the annual professional servicing and testing of the automatic fire extinguishing system?                 {IDAPA 16.03.22.750.06} | | |

**The check lists can be used as a quality improvement tool and are offered as a helpful guide.**
**They do not take the place of the rule requirements.**
**It is highly recommended that the check lists be used in conjunction with the rules themselves.**